

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6001929</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>06/10/2016</b>
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

**SAUK VALLEY SENIOR LIVING**

**1000 DIXON AVENUE  
ROCK FALLS, IL 61071**

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
S 000	Initial Comments	S 000		
	Annual Licensure Survey			
S9999	Final Observations	S9999		
	Statement of Licensure Violations			
	300.610a) 300.1210a) 300.1210b) 300.2040b) 300.2050f) 300.3240a)			
	Section 300.610 Resident Care Policies			
	a) The facility shall have written policies and procedures governing all services provided by the facility. The written policies and procedures shall be formulated by a Resident Care Policy Committee consisting of at least the administrator, the advisory physician or the medical advisory committee, and representatives of nursing and other services in the facility. The policies shall comply with the Act and this Part. The written policies shall be followed in operating the facility and shall be reviewed at least annually by this committee, documented by written, signed and dated minutes of the meeting.			
	Section 300.1210 General Requirements for Nursing and Personal Care			
	a) Comprehensive Resident Care Plan. A facility, with the participation of the resident and the resident's guardian or representative, as applicable, must develop and implement a comprehensive care plan for each resident that includes measurable objectives and timetables to			

**Attachment A**  
**Statement of Licensure Violations**

Illinois Department of Public Health

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

**06/28/16**

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S9999	<p>Continued From page 1</p> <p>meet the resident's medical, nursing, and mental and psychosocial needs that are identified in the resident's comprehensive assessment, which allow the resident to attain or maintain the highest practicable level of independent functioning, and provide for discharge planning to the least restrictive setting based on the resident's care needs. The assessment shall be developed with the active participation of the resident and the resident's guardian or representative, as applicable. (Section 3-202.2a of the Act)</p> <p>b) The facility shall provide the necessary care and services to attain or maintain the highest practicable physical, mental, and psychological well-being of the resident, in accordance with each resident's comprehensive resident care plan. Adequate and properly supervised nursing care and personal care shall be provided to each resident to meet the total nursing and personal care needs of the resident.</p> <p>Section 300.2040 Diet Orders</p> <p>b) Physicians shall write a diet order, in the medical record, for each resident indicating whether the resident is to have a general or a therapeutic diet. The diet shall be served as ordered.</p> <p>Section 300.2050 Meal Planning</p> <p>f) Other foods shall be served to round out meals, satisfy individual appetites, improve flavor, and meet the individual's nutritional and caloric needs.</p> <p>Section 300.3240 Abuse and Neglect</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident.</p> <p>These requirements are not met as evidenced by:</p> <p>The findings include:</p> <p>Based on observation, interview, and record review, the facility failed ensure a resident did not experience a severe unplanned weight loss over three months. The facility failed to put interventions in place to prevent a resident from sustaining a 31 pound weight loss. These failures resulted in R2 sustaining a 14% weight loss over three months and experiencing a decline in food intake. This applies to 2 of 6 residents (R2, R8) reviewed for weight loss in the sample of 10. The findings include:</p> <p>1. R2's June 2016 Physician Order Sheet shows diagnoses of dementia, anxiety, coronary artery disease, depression with psychosis and irritable bowel syndrome. R2's Minimum Data Set (MDS) dated April 22, 2016 shows a BIMS (Brief Interview of Mental Status) of 99 (unable to answer) and requires a one person physical assistance to eat. R2's MDS shows she had a 5% or more weight loss in the last month and was not on a physician prescribed weight loss program. On June 7, 2016 at 11:50 AM, R2 was lying flat on her back, sleeping in her bed. E9 and E11 (Certified Nurse Aides-CNAs) were assisting R2's roommate. E12 (Registered Nurse) entered R2's room, saw R2 was sleeping and stated to E9 and E11, "Hold her (R2) food. If she's sleeping just let her." E11 stated, "She (R2) did not eat breakfast either." E9 stated, "She is up a lot throughout the</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>night, so if she is sleeping during a meal, we let her sleep. We save her tray and feed her later." E9, E11 and E12 exited the room. Staff did not awake up R2 or offer any cueing.</p> <p>On June 7, 2016 at 1:00 PM, 2:00 PM, and 3:00 PM, R2 was observed lying flat on her back, sleeping in her bed.</p> <p>On June 7, 2016 at 3:05 PM, E9 (day CNA) gave a verbal shift change report to E14 (evening CNA). E9 did not relay any information regarding R2 missing the breakfast and lunch meals for the day. At 3:10 PM, E3 (Dietary Manager-DM) said R2's untouched lunch tray was returned to the kitchen. E3 said R2 did not eat lunch and a tray had not been saved for her to eat after she wakes up. E3 said, "With all the confusion, she (R2) never got fed lunch. There are always peanut butter and jelly sandwiches, grilled cheese, and cereal for her if she misses a meal though".</p> <p>On June 7, 2016 at 4:00 PM, R2 was seated in the dining room. A staff member was seated next to R2 assisting her to eat cereal (Fruit Loops) and a peanut butter and jelly sandwich.</p> <p>On June 8, 2016 at 9:30 AM, R2 was seated in the dining room. E3 (DM) was assisting R2 to eat cereal (Fruit Loops). R2 ate 0% of the cereal and E3 stated, "Maybe we should try something else. She isn't eating this cereal."</p> <p>On June 8, 2016 at 12:30 PM, E12 (Director of Nurses-DON) stated it is a facility expectation that aides report at shift change when a resident misses a meal and residents should be prompted or offered food at every meal.</p> <p>R2's 2016 Monthly Weight Record showed a 16 pound (113 pounds to 97 pounds) weight loss between March and May. R2's May 12, 2016 laboratory values showed her albumin value as 3.2 gm/dl (low) and her total protein as 5.0 gm/dl (low). R2's May 2016 Food and Fluid Intake Sheet showed 41 of 93 meals declined (44%) and</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>20 of 31 bedtime snacks declined (65%). R2's Registered Dietitian note dated May 27, 2016 showed, "Used to enjoy PB&amp;J (peanut butter and jelly), grilled cheese, Fruit Loops. No longer R/T (related to) confusion. Recommend add Magic Cup (nutritional supplement) TID (three times daily)." A Dietary Services Communication form showed a physician approval for the nutritional supplement recommendation was not received until June 1, 2016 (5 days later). R2's Physician Order Sheet showed an order dated June 1, 2016 for Magic Cup TID. R2's June 2016 Food and Fluid Intake Sheet showed she did not receive the Magic Cup until June 7, 2016 (6 days later) and was still declining 10 of 21 meals offered (48%) for the June 1 to June 7 period. R2's June 2016 tray card did not reflect Magic Cup to be given at the breakfast, lunch, and dinner meals. The tray card dislike section did not show PB&amp;J, grilled cheese, or Fruit Loops.</p> <p>On June 8, 2016 at 1:10 PM, Z2 (Registered Dietician) stated the facility should follow up with the physician on all dietary recommendations. When a physician response is not received within "about 24 hours," a second fax or phone call should be placed. The physician follow up is especially important for a resident with a history of unplanned weight loss and current dietary recommendations are increasing. Z2 stated a resident with weight loss "should absolutely be offered foods they enjoy, especially if they are losing weight and it isn't a desired loss."</p> <p>On June 9, 2016 at 10:30 AM, E3 (Dietary Manager) stated R2's physician order for the Magic Cup was approved on June 1, 2016 but she was not certain it was being given to her until June 7. E3 stated, "I missed her (R2). I should have documented a MC for Magic Cup on the top of the intake sheet but I didn't. I should have</p>	S9999		

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S9999	Continued From page 5  written it on her tray card too. I haven't been doing that up to this point, but I will now." R2's Care Plan dated April 13, 2016 showed interventions to offer breakfast when she wakes up, provide diet as ordered, see POS (Physician Order Sheet) for current diet order, honor food preferences, replace disliked foods when possible, define food dislikes, note changes in usual habits and report to nurse, assist/feed at meal times as needed to complete meal, and follow recommendations of RD/LDN (Registered Dietician/Licensed Dietician Nutritionist). R2's care plan did not show an updated intervention related to the Magic Cup. The facility's Food Preference Policy dated 10/13 showed "3. Food dislikes or intolerances shall be written on the resident's tray card so appropriate substitutions can be provided. 4. Food preferences and food dislikes shall be updated as necessary." The facility's Meal and Supplement Consumption Documentation Policy dated 04/13 showed "7. Supplement intake provided by the dietary department either at meals or between meals shall be recorded on the Food & Fluid Intake sheet .....Examples of items to be recorded include: .....Magic Cup." The facility's Resident Weight Monitoring policy revision dated 09/08 showed, "6. The Food Service Manager and/or dietitian reviews the resident's nutritional status and makes recommendation for intervention in the nutrition progress notes. 7. The Food Service Manager and /or dietitian notify nursing of any recommendations that have been documented. Nursing then contacts the physician to convey recommendations and obtain any new orders. 8. Significant changes in weights are documented in the care plan with goals and approaches/interventions listed."	S9999		

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S9999	<p>Continued From page 6</p> <p>2. R8's Physician Order Sheet dated June, 2016 shows R8 has diagnoses to include: dementia and chronic obstructive pulmonary disease.</p> <p>R8's MDS of February 18, 2016 shows R8 is cognitively impaired and requires assistance with eating and activities of daily living.</p> <p>On June 9, 2016 at 7:50 AM, R8 was sitting in the assisted dining room, feeding himself breakfast. R8 was served a frenchtoast bake and a bowl of oatmeal (supercereal). R8 ate approximately 1/2 of his french toast bake, and all of his oatmeal. R8's meal card was in front of him and did not include that he was supposed to receive a magic cup twice a day.</p> <p>R8's weight record shows his weight on February 12, 2016 was 145 pounds, and on February 29, 2016, R8's weight dropped to 119 (a 26 pound loss or 17.9% in less than a month). R8's record shows his weight was 113.5 pounds on March 7, 2016 for a total loss of 31.5 pounds or 21.7% in less than one month.</p> <p>R8's Dietary notes dated March 2, 2016 shows "significant weight change, admit weight 145 pounds...119 pounds on February 29, 2016."</p> <p>R8's nutritional assessment (completed by the Registered Dietician) dated February 17, 2016 shows weight is 145 pounds and is below standards and tends to indicate inadequate energy stores. This assessment shows "recommend medpass 2.0 60 ml twice a day."</p> <p>R8's Physician Order Sheet shows the first dietary intervention was ordered on March 7, 2016 for Med Pass (Dietary Supplement) 60 ml (milliter) twice a day (one week after the 26</p>	S9999			



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S9999	<p>Continued From page 7</p> <p>pound weight loss and 3 weeks after the dietitian recommendation was made). R8's Physician Order Sheet shows the next dietary intervention was not ordered until April 4, 2016, when R8's weight was 114 pounds.</p> <p>R8's Dietician progress noted dated March 30, 2016 shows an evaluation was done for weight loss. This note shows R8's Ideal Body Weight is 166 pounds, and his current weight is 119 pounds. This note shows "per staff these weights are reported correctly...resident is very active in the facility; clothes starting to appear to be too large...fair/good appetite..."</p> <p>R8's May 27, 2016 Registered Dietician progress note shows R8's weight is 114 pounds, and R8 is underweight.</p> <p>R8's Nutrition Care Plan was not initiated until March 23, 2016, over 3 weeks after R8's 26 pound weight loss. The interventions on R8's March 23, 2016 care plan have not been updated with current orders and does not include the correct order for Medpass 90 ml four times a day (listed on care plan for 60 ml twice a day). This care plan states R8 is to be weighed monthly, instead of weekly and does not have the dietary interventions for supercereal, magic cup, or whole milk.</p> <p>Review of R8's documented meal intakes for February shows R8's breakfast, lunch, and supper intakes vary from 25 to 100%. The intake sheet shows R8's lunch intakes were 50 to 75% for February 12 through February 16, 2016 and declined to 25 to 50% from February 16 through February 22, 2016.</p> <p>On June 9, 2016 at 8:45 AM, Z1 (Medical Doctor)</p>	S9999			



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S9999	<p>Continued From page 8</p> <p>said R8 has end stage COPD and has an increase(ed) (need for) calorie consumption. Z1 said a dietary recommendation should be sent to him when the facility receives it from the dietician and should be implemented within 24 hours of him signing it. Z1 said a 30 pound weight loss seems like a lot of weight to lose.</p> <p>On June 9, 2016 at 11:15 AM, E3 (Dietary Manager) said R8 is losing weight because he is very active and always on the go. E3 said R8 is not always compliant with the dietary recommendations and does not always eat his supercereal. E3 said she is responsible for monitoring weights and notifying the Director of Nursing (DON) and Dietician if a resident has weight loss of more than 5%. E3 said she takes the dietician's recommendations to nursing, and the normal time for an order to be started is a day or two.</p> <p>On June 9, 2016 at 12:20 PM, Z2 (Registered Dietician) said R8 lost 31 pounds in less than 3 months and had a significant weight loss of more than 7.5 %. Z2 said the facility should notify her of a significant weight loss, and she only comes to the facility once a month at the end of the month. Z2 said if the facility is aware before that of a weight concern, they should notify her so she can make recommendations before she comes to the facility. Z2 said if a resident has a significant weight loss the facility should be discussing the weight loss in an interdisciplinary meeting weekly and trying things to improve the resident's weight. Z2 said they should also be calling her and asking her to put interventions in place. Z2 said a care plan for weight loss should have been implemented within a couple days of R8's weight loss on February 29, 2016. Z2 said if a resident has a condition causing the weight loss, it would</p>	S9999			

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S9999	Continued From page 9  be documented on the nutritional assessment.  On June 9, 2016 at 1:15 PM, E2 (DON) said the restorative CNA performs all weekly and monthly weights so the same person is weighing the resident each time. E2 said if the restorative CNA notices a change in weight she re-weighs the resident and notifies the DON. E2 said R8 was not eating well because he was so busy, and she is not sure why he loses weight the way he does. E2 said all residents should have a dietary care plan initiated on admission to monitor weights, and this care plan should have interventions added to it if a weight loss occurs. E2 said the nutritional care plan should be accurate and up to date.  (B)	S9999			